

STATE OF MICHIGAN  
 DEPARTMENT OF ATTORNEY GENERAL

**CAMPAIGN FINANCIAL STATEMENT**

**PART 1**

Please Type or Print in Ink

	COLUMN	COLUMN	COLUMN
1. Gross Revenue			1.
2. Fees, Salaries and Commissions			
a. Promotional fees			
b. Office manager's fee			
c. Weekly payroll			
d. Other (itemize)			
1. _____			
2. _____			
e. Total (add lines 2a through 2d)		2e.	
3. Other Expenses			
a. Advertising			
b. Furniture and Equipment			
c. Office expenses			
d. Office rental			
e. List rental			
f. Postage			
g. Printing (solicitation material, tickets)			
h. Telephone			
i. Utilities			
j. Other (itemize)			
1. _____			
2. _____			
k. Total (add lines 3a through 3j)		3k.	
4. Direct Expenses			
a. Auditorium rental			
b. Booking fee			
c. Printing (program book)			
d. Event insurance			
e. Police and fire protection			
f. Show fee (performers)			
g. Other direct expenses (itemize)			
1. _____			
2. _____			
h. Total (add lines 4a through 4g)		4h.	
5. Total expenses (add lines 2e, 3k and 4h)			5.
6. Amount retained by charitable organization			6.

**IMPORTANT**

The sum of lines 5 and 6 must equal the amount shown on line 1.

If it does not, attach a complete explanation.

Indicate here the total amount of uncollected pledges as of the day of this report: \$ \_\_\_\_\_

## PART II

MIFR No.		
Name of Professional Fund Raiser		
Address		
City	State	Zip Code

MICS No.		
Name of Charitable Organization		
Address		
City	State	Zip Code

CAMPAIGN BEGINNING DATE: \_\_\_\_\_ ENDING DATE: \_\_\_\_\_

REPORT TYPE: \_\_\_\_\_ an annual report on a campaign lasting more than one year  
(check one) \_\_\_\_\_ a final report

1. Was a performance, show, or other type of event held in connection with the solicitation campaign? YES ☐ NO ☐  
If yes, A. State when and where the event was held:  
Date: \_\_\_\_\_ Location: \_\_\_\_\_  
B. Did the solicitations request funds to allow children, the handicapped, or others to attend the event? YES ☐ NO ☐  
If yes, attach a listing of names and addresses of all persons or organizations who accepted tickets and number of tickets accepted.

2. Books and records used in the preparation of this report are in the care of:

Full Name		
Address		
City	State	Zip Code

3. Copies of all solicitation materials (telemarketing scripts, letters, fliers, invoices, etc.) must be attached.

### CERTIFICATIONS

We certify that the statements made on this Campaign Financial Statement, including any attachments, are accurate, complete and true to the best of our knowledge.

For the Professional Fund Raiser:

Signature
Print or Type Name
Title
Date

For the Charitable Organization:

Signature
Print or Type Name
Title
Date

## **CAMPAIGN FINANCIAL STATEMENT INSTRUCTIONS**

This form is to be completed and filed with the Charitable Trust Section not more than ninety (90) days after the completion of each solicitation campaign involving a Type B contract. For a solicitation campaign lasting more than a year, a Campaign Financial Statement is due annually. This financial report should be completed on the cash basis (See instructions for line 6, column 3 regarding accrued expenses.)

All lines on this form may not be applicable to all types of solicitation campaigns. For example, lines 4a through 4g will apply only if a special event, such as a stage show, carnival, etc., is held in connection with a fund raising activity. Use the preprinted line items to the extent possible, although blank lines are provided to tailor the form to different kinds of solicitation activities.

Parts I and II of the form must be completed to the extent applicable. The completed report must be signed by an authorized official of the professional fund raiser and an authorized official of the charitable organization.

### **SPECIFIC INSTRUCTIONS FOR PART I**

Line 1, column 3 - Enter the total money actually collected as a result of the campaign. This is the gross amount before deducting any expenses. Uncollected pledges as of the date of this report are to be entered at the bottom of the form in the space provided.

Lines 2a-d, column 1 - Enter fees, salaries, and commissions of the promoter, solicitors, office manager and any other person who was paid for managing, arranging, or conducting the fund raising, or overseeing the promotion or staging of a special event.

Line 2e, column 2 - Enter the total of lines 2a-d.

Lines 3a-j - column 1 - Enter other expenses which were not directly related to the staging of a performance, show, or other kind of special event. These are costs associated with soliciting and collecting donations, or ticket or advertising space purchases.

Line 3k, column 2 - Enter the total of lines 3a-j.

Lines 4a-g, column 1 - Enter expenses directly related to staging the performance, show, or other special event.

Line 4h, column 2 - Enter the total of lines 4a-g.

Line 5, column 3 - Enter the sum of figures entered in column 2. This should equal the total expenses paid in the fund raising campaign.

Line 6, column 3 - Enter the amount retained by the charitable organization after all expenses (paid or accrued). Accrued expenses are those which have been incurred but not yet paid. This figure is, in essence, the "profit" to the charity after all expenses, regardless of who is or was responsible for paying them and regardless of whether they actually have been paid yet. Include a list of accrued expenses.

Send the completed form to:

Department of Attorney General  
Charitable Trust Section  
PO Box 30214  
Lansing MI 48909  
(517) 373-1152